

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"><li><input type="checkbox"/> Complete items 1, 2, and 3.</li><li><input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</li><li><input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>		<b>A. Signature</b>  <b>B. Received by (Printed Name)</b> <b>C. Date of Delivery</b>	
1. Article Addressed to:  <b>Francois Auguston</b> <b>4704 Redwood Dr.</b> <b>McKinney, TX 75070</b>   9590 9402 6402 0303 5628 89		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)  <b>7020 1290 0000 4194 5828</b>		<b>3. Service Type</b> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span>			

